



THE HOTEL ROANOKE & CONFERENCE CENTER
A DOUBLETREE HOTEL
VENDOR TECHNOLOGY REQUEST FORM

Conference Name: _____

Dates: _____

Vendor Name: _____

Booth Number: _____ Contact Phone Number: _____

Equipment	Quantity Required	Total Cost Each Per Day	Number of Days	Total (Cost x Qty x # of Days)
Extension Cord		\$ 14.92		
Power Strip		\$ 14.92		
110 Outlet		\$ 59.50		
208 / 220 Outlet		\$ 178.50		
Power Box: (4) 110 Outlets and (1) 220 Outlet		\$ 238.00		
Telephone with Line (Local & Toll Free calls only)		\$ 80.83		
Modem Line (Local & Toll Free calls only)		\$ 80.83		
Direct Internet Access (Ethernet)		\$ 118.14		
27" Television with VCR on Cart		\$ 192.75		
17" Computer Monitor		\$ 68.40		
Windows 98 Computer with 17" Monitor and Direct Internet Access		\$ 186.53		

Vendor charges are for the full event time and inclusive of tax and service fee. All charges must be paid in advance by check or credit card. All items are subject to availability. Many special requests can be filled. Please call our Business Center at 540-853-8242 or send email to businesscenter@hotelroanoke.com with any questions or needs.

Complete the following and fax this form to 540-853-8231 or mail check and this form to:

The Hotel Roanoke & Conference Center

Attn: Accounts Receivable, 110 Shenandoah Ave. Roanoke, VA 24016

Name, as it appears on the card: _____
(PLEASE PRINT)

Credit card Type: _____ Expiration Date: _____

Credit Card Account Number: _____

Phone Number: _____ Fax Number: _____

I, as the client, request that The Hotel Roanoke & Conference Center charge my credit card listed above for the above items.

Amount: _____

I also understand that I, as the client, will need to provide The Hotel Roanoke & Conference Center a front and back copy of my credit card, or the access to my credit card to make such a copy themselves.

Authorized Signature (must be same as imprinted on credit card)

Date